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** CONTINUING DATA ***** *None 02*** FOREIGN APPLICATIONS ***** *None 02*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/18/2003

Foreign Priority claimed ☐ yes ☒ no
35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance
Verified and Acknowledged *Quidley*
Examiner's Signature Initials

STATE OR

SHEETS

TOTAL

INDEPENDENT

COUNTRY

DRAWING

CLAIMS

CLAIMS

FL

3

9

3

ADDRESS

40987

AKERMAN SENTERFITT

P. O. BOX 3188

WEST PALM BEACH, FL

33402-3188

TITLE

Interactive voice response (IVR) aggregation master service

FILING FEE

RECEIVED
750

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time☐ 1.18 Fees (Issue)☐ Other _____☐ Credit